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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		SBURSE Authorized Co				Office Use Only
NAME OF COMMITTEE (in	TYPE OR PRII	•	Example: If typin	ng, type	12FE4M5	
LAMBERT FOR	R CONGRESS					
ADDRESS (number and	P.O. BOX 96	4				
Check if diff than previou reported. (A0	ısly NASHUA				NH 0	3061
2. FEC IDENTIFIC	ATION NUMBER	CITY ▲			STATE A	ZIP CODE
C C0054891	7	3. IS THIS REPORT	X NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT NH 02
(a) Quarterly Re	Quarterly Report (Q1)	(b) 12-Day PF	RE-Election Repo Primary (12P Convention ()	X General (12	
-	Quarterly Report (Q2) 15 Quarterly Report (Q3)	Election of	n 11 /	04	Y Y Y Y Y 2014	in the NH State of
January	31 Year-End Report (YE)	(c) 30-Day PC	DST -Election Rep	port for the:	<u> </u>	
			General (30G	à)	Runoff (30F	Special (30S)
Terminat	tion Report (TER)	Election of	on/	D D /	Y " Y " Y	in the State of
5. Covering Period	10 / 01	/ Y " Y " Y " Y " Y " Z 2014 "	through	10 M	/ 0 0 /	2014
I certify that I have ex	xamined this Report and		knowledge and	belief it is t	rue, correct and	complete.
Signature of Treasure			[Electronically I	Filed]	Date 10	/ D D / Y Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z
	false, erroneous, or incomp	lete information ma	y subject the per	rson signing	this Report to the	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LAMBERT FOR CONGRESS

			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	450013.59
	(b)	Total Contribution Refunds (from Line 20(d))	73550.00	74350.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	-73550.00	375663.59
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	473534.20
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	22.50
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	473511.70
8.		th on Hand at Close of porting Period (from Line 27)	2151.89	
9.	the	ots and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	100000.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

LAMBERT FOR CONGRESS

10 10 2014 01 2014 15 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 397724.25 (i) Itemized (use Schedule A)..... 0.00 45789.34 (ii) Unitemized (iii) TOTAL of contributions 0.00 443513.59 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 6500.00 (such as PACs)..... 0.00 0.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 0.00 450013.59 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 100000.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 100000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 22.50 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 550036.09 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	473534.20
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	73550.00	74350.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	73550.00	74350.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	73550.00	547884.20
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	75701.89
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		75701.89
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	73550.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		2151.89

Image# 14952392968		
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS		
Full Name (Last, First, Middle Initial) A. JASON G ALLEN		Date of Disbursement
Mailing Address 75 MARKET STREET SUITE 401		10 01 2014
City State PORTLAND ME	Zip Code 04101	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND		2600.00 Transaction ID : SB20A.6380
Candidate Name	Ту	egory/ /pe
Office Sought: House		
Full Name (Last, First, Middle Initial) DAVID ALMEDA Mailing Address 10 BLACKFOOT DR		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State NASHUA NH	Zip Code 03063	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name	Cate	2600.00 Transaction ID : SB20A.6373 egory/
	or: 2014	ype
State: District: Full Name (Last, First, Middle Initial)		
ERIN K ALMEDA Mailing Address 10 BLACKFOOT DR		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
·	Zip Code	Amount of Each Disbursement this Period
NASHUA NH Purpose of Disbursement CONTRIBUTION REFUND	03063	2600.00
Candidate Name		egory/ /pe
Office Sought: House Disbursement F		

X General

Primary

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Other (specify)

State:

Senate

District:

President

7800.00

PAGE 6 17 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page **X** 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement STEPHEN E BARNES 2014 Mailing Address 2500 MAIN PLACE TOWER 10 01 350 MAIN STREET City State Zip Code Amount of Each Disbursement this Period NY **BUFFALO** 14202 Purpose of Disbursement 2400.00 CONTRIBUTION REFUND Transaction ID: SB20A.6395 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House X General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) PAUL E CLARK Date of Disbursement Mailing Address 353 PINE HILL RD 10 01 2014 City State Zip Code Amount of Each Disbursement this Period NH 03049 **HOLLIS** 400.00 Purpose of Disbursement CONTRIBUTION REFUND Transaction ID: SB20A.6389 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. PRISCILLA L CLEGG Date of Disbursement Mailing Address 39 TRIGATE RD 10 01 2014 City State Zip Code Amount of Each Disbursement this Period **HUDSON** NH 03051 Purpose of Disbursement 2400.00 CONTRIBUTION REFUND Transaction ID: SB20A.6390 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 X General Senate Primary President Other (specify) State: District: 5200.00 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

	FOR LINE	NUMBE	R:		PAGE	7	OF	17
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for each category of the Detailed Summary Page		17		18		19a		19b
Detailed Summary Page	X	20a		20b		20c		21
y not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.								

ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement ROBERT CLEGG 2014 Mailing Address 39 TRIGATE RD 10 01 Zip Code City State Amount of Each Disbursement this Period NΗ **HUDSON** 03051 Purpose of Disbursement 2600.00 CONTRIBUTION REFUND Transaction ID: SB20A.6392 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) LAWRENCE COSTA Date of Disbursement Mailing Address P.O. BOX 399 10 01 2014 City State Zip Code Amount of Each Disbursement this Period NOTTINGHAM NH 03290 2600.00 Purpose of Disbursement CONTRIBUTION REFUND Transaction ID: SB20A.6384 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. MARK A GINNARD Date of Disbursement Mailing Address 4 HUBBARD ROAD 10 01 2014 City State Zip Code Amount of Each Disbursement this Period 03031 **AMHERST** NH Purpose of Disbursement 2400.00 CONTRIBUTION REFUND Transaction ID: SB20A.6387 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Primary Senate President Other (specify) State: District: 7600.00 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBE	R:	PAGE	8	OF	17
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	ny information copied from such Reports and Statements may for commercial purposes, other than using the name and a			erson for the purp	ose of solici	ting contribu	utions
	NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS						
۹.	Full Name (Last, First, Middle Initial) BRIAN R HALL				D D /	Y	Y
	Mailing Address 10 PRESERVE DR			10	01	2014	
	City State NASHUA NH	Zip Code 03064		Amount of Ea	ach Disburse	ement this P	eriod
	Purpose of Disbursement CONTRIBUTION REFUND		· · · ·	Tunnantian ID	00004.00	2600.0	00
	Candidate Name		Category/ Type	Transaction ID	: SB20A.630	69	
	Office Sought: House Senate President State: Disbursement For: Primary Other (sp	X General	1,100				
3.	Full Name (Last, First, Middle Initial) SHARON C HALL			Date of Disbu		y	Y
	Mailing Address 10 PRESERVE DR			10	01	2014	
	City State NASHUA NH	Zip Code 03064		Amount of Ea	ach Disburse	ement this P	eriod
	Purpose of Disbursement CONTRIBUTION REFUND			Transaction ID	: SB20A.63	2600.0 94	00
	Candidate Name		Category/ Type				
	Office Sought: House	X General					
	Full Name (Last, First, Middle Initial) DAVID M HOLDEN			Date of Disbu	ırsement		
Э.					D D /	Y	1
	Mailing Address 310 PINE HILL RD			10	01	_ 2014	
	·	o Code 3049		Amount of Ea	ach Disburse	ement this P	eriod
	Purpose of Disbursement CONTRIBUTION REFUND					800.	00
	Candidate Name		Category/ Type	Transaction ID	: SB20A.637	74	
	Office Sought: Senate Primary President State: Disbursement For: Primary Other (sp	X General					
S	SUBTOTAL of Disbursements This Page (optional)					6000.0	00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement BRENDAN P KEEGAN 2014 Mailing Address 39 BERKELEY ST 10 01 City State Zip Code Amount of Each Disbursement this Period NΗ **NASHUA** 03064 Purpose of Disbursement 2600.00 CONTRIBUTION REFUND Transaction ID: SB20A.6368 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) DANA KEEGAN Date of Disbursement Mailing Address 39 BERKELEY ST 10 01 2014 City State Zip Code Amount of Each Disbursement this Period NH 03064 **NASHUA** 2600.00 Purpose of Disbursement CONTRIBUTION REFUND Transaction ID: SB20A.6372 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. CURTIS M KING Mailing Address 67 BERKELEY STREET 10 01 2014 City State Zip Code Amount of Each Disbursement this Period NASHUA 03064 NH Purpose of Disbursement 2600.00 CONTRIBUTION REFUND Transaction ID : SB20A.6371 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House X General Senate Primary President Other (specify) State: District: 7800.00 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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An or	y information copied from such Reports and Statements may not be for commercial purposes, other than using the name and address of	sold or us	sed by any pe cal committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS			
۸.	Full Name (Last, First, Middle Initial) MARY JANE KING		Date of Disbursement	
	Mailing Address 67 BERKELEY STREET			10 01 2014
City State Zip Code NASHUA NH 03064				Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND			2600.00 Transaction ID : SB20A.6388
	Candidate Name		Category/ Type	
	Office Sought: House Senate President Disbursement For: 2014 Primary Other (specify) State:	General		
3.	Full Name (Last, First, Middle Initial) BRADLEY KREICK			Date of Disbursement
	Mailing Address 53 INDIAN ROCK ROAD			10 01 2014
	City State Zip Co NASHUA NH 03063			Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND			1000.00 Transaction ID : SB20A.6367
	Candidate Name		Category/ Type	
	Office Sought: House	General		
_	Full Name (Last, First, Middle Initial) LORRAINE O KUTCHER			Date of Disbursement
٠.	Mailing Address PO BOX 1727			10 / D D / Y Y Y Y Y Y 10 01 2014 _
	City State Zip Code MEREDITH NH 03253-1727			Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION REFUND			1000.00
	Candidate Name		Category/ Type	Transaction ID : SB20A.6386
	Office Sought: House Senate President Disbursement For: 2014 Primary Other (specify) State:	General		
s	UBTOTAL of Disbursements This Page (optional)			4600.00
т	OTAL This Period (last page this line number only)			, ,

SCHEDULE B (FEC Form 3)

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Any information copied from such Reports and Statements or for commercial purposes, other than using the name an			rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. LORI K LAMBERT			Date of Disbursement 10 01 2014
Mailing Address 34 BROAD STREET City State	Zip Code		Amount of Each Disbursement this Period
NASHUA NH Purpose of Disbursement CONTRIBUTION REFUND	03064		2600.00
Candidate Name		Category/ Type	Transaction ID : SB20A.6385
Office Sought: House Senate President State: Disbursement F Prima Other		-,,,,,	
Full Name (Last, First, Middle Initial) ANNELIESA B LAW Mailing Address 78 CONCORD STREET			Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
City State NASHUA NH	Zip Code 03064		Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name		Category/	2600.00 Transaction ID : SB20A.6365
		Type	
State: District: Full Name (Last, First, Middle Initial)			
BRIAN H LAW			Date of Disbursement
Mailing Address 78 CONCORD STREET			10 01 2014
City State NASHUA NH	Zip Code 03064		Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name		Category/ Type	2600.00 Transaction ID : SB20A.6370
Office Sought: House Disbursement F			
SUBTOTAL of Disbursements This Page (optional)			7800.00
TOTAL This Period (last page this line number only)			

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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		Detailed Summar	y Page	X 20a 20b 20c 21
	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS			
۸.	Full Name (Last, First, Middle Initial) KATHY M LYON Mailing Address 98 SODOM RD		Date of Disbursement 10 01 2014	
	City CENTER TUFTONBORO Purpose of Disbursement		Amount of Each Disbursement this Period 2600.00	
	CÓNTRIBUTION REFUND Candidate Name		Category/ Type	Transaction ID : SB20A.6382
	Office Sought: House Senate President State: Disburse	Primary General Other (specify)		
3.	Full Name (Last, First, Middle Initial) WILLIAM W LYON Mailing Address 98 SODOM RD			Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement 2014 - 2014 - 2014
	City CENTER TUFTONBORO Purpose of Disbursement CONTRIBUTION REFUND	State Zip Code NH 03816		Amount of Each Disbursement this Period 2600.00
	Senate	ment For: 2014 Primary	Category/ Type	Transaction ID : SB20A.6399
	State: District: Full Name (Last, First, Middle Initial)	Other (specify)		
٠.	ELIZABETH MATTHEWS Mailing Address 22 CHURCH RD			Date of Disbursement M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
	City State BEDFORD NH Purpose of Disbursement CONTRIBUTION REFUND	e Zip Code 03110		Amount of Each Disbursement this Period
	Candidate Name Office Sought: House Disburse Senate	ment For: 2014 Primary	Category/ Type	Transaction ID : SB20A.6377
	President State: District:	Other (specify)		
SI	JBTOTAL of Disbursements This Page (optional)		<u></u>	7400.00
TC	OTAL This Period (last page this line number only	·)		, ,

	FOR LINE NUMBER	PAGE	13	OF	17	
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	_				_
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement ROBERT G PRUNIER 2014 Mailing Address 59 HIDEAWAY LANE 10 01 City State Zip Code Amount of Each Disbursement this Period NΗ **HOLLIS** 03049 Purpose of Disbursement 900.00 CONTRIBUTION REFUND Transaction ID: SB20A.6393 Candidate Name Category/ Type 2014 Office Sought: House Disbursement For: Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) TIMOTHY QUICK Date of Disbursement Mailing Address 108 LAKE SHORE DR 10 01 2014 #1539 City State Zip Code Amount of Each Disbursement this Period NORTH PALM BEACH FL 33408 2600.00 Purpose of Disbursement CONTRIBUTION REFUND Transaction ID: SB20A.6397 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. Ms. GRACE SOLINSKY Date of Disbursement Mailing Address 59 ROLLING WOODS DR 10 01 2014 City State Zip Code Amount of Each Disbursement this Period **BEDFORD** NH 03110-4539 2600.00 Purpose of Disbursement CONTRIBUTION REFUND Transaction ID: SB20A.6379 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 X General Senate Primary President Other (specify) State: District: 6100.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	14 OF	17	
Use separate schedule(s)	(check only one)				
for each category of the Detailed Summary Page	17 18	8	19a	19b	
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by not be sold or used by any person for the purpose of soliciting contributions					

			Detailed Summar	y Page	X 20a 20b 20c	21		
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
LAMBER	OMMITTEE (In Full) RT FOR CONGRE	SS						
Full Name (Last, First, Middle Initial) A. Mr. KENNETH S SOLINSKY Mailing Address 59 ROLLING WOODS DR				Date of Disbursement 10 01 2014	TY			
City	os nolling mode	State	Zip Code		Amount of Each Disbursement this	Period		
BEDFORD NH 03110-4539 Purpose of Disbursement CONTRIBUTION REFUND					2600.00 Transaction ID : SB20A,6383			
Candidate Name								
Office Sough State:	t: House Senate President District:	Disbursement For: Primary Other (spe	X General					
B. DIANE T					Date of Disbursement	Y		
Mailing Address P.O. BOX 208					10 01 2014			
City NASHUA Purpose of D	Disbursement	State NH	Zip Code 03061		Amount of Each Disbursement this	Period		
Purpose of Disbursement CONTRIBUTION REFUND Candidate Name			Category/	Transaction ID : SB20A.6375				
Office Sough	t: House Senate President District:	Disbursement For: Primary Other (spe	X General	Туре				
,	ast, First, Middle Initial) S N TESSIER				Date of Disbursement			
Mailing Address P.O. BOX 208					10 01 / Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10	Y		
City NASHUA Purpose of D	Disbursement TION REFUND	State Zip NH 030	Code 061		Amount of Each Disbursement this	Period		
Candidate Name Catego			Category/ Type	Transaction ID : SB20A.6396				
Office Sough	t: House Senate President District:	Disbursement For: Primary Other (spe	X General					
SUBTOTAL of	Disbursements This Page	(optional)			780	00.00		
TOTAL This Pe	eriod (last page this line n	umber only)						

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	I	PAGE	15	OF	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement JOHN E TULLEY II 2014 Mailing Address 147 DW HWY 10 01 Zip Code City State Amount of Each Disbursement this Period NΗ **NASHUA** 03060 Purpose of Disbursement 2600.00 CONTRIBUTION REFUND Transaction ID: SB20A.6381 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) EDMUND C YOUNG Date of Disbursement Mailing Address 47 CAROL CT. 10 01 2014 City State Zip Code Amount of Each Disbursement this Period LACONIA NH 03246 2600.00 Purpose of Disbursement CONTRIBUTION REFUND Transaction ID: SB20A.6376 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 5200.00 SUBTOTAL of Disbursements This Page (optional)..... 73300.00 TOTAL This Period (last page this line number only).....

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.6236 NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary GARY LAMBERT General Mailing Address Other (specify) \blacktriangledown 32 COLUMBIA AVENUE City State ZIP Code NH 03064 NASHUA Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 19^D ^M08^M ž014 0.00 12/31/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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13b Transaction ID: SC/10.6247 NAME OF COMMITTEE (In Full) LAMBERT FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary GARY LAMBERT General Mailing Address Other (specify) \blacktriangledown 32 COLUMBIA AVENUE City State ZIP Code NH 03064 NASHUA Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 08^M ž014 0.00 12/31/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) 100000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.